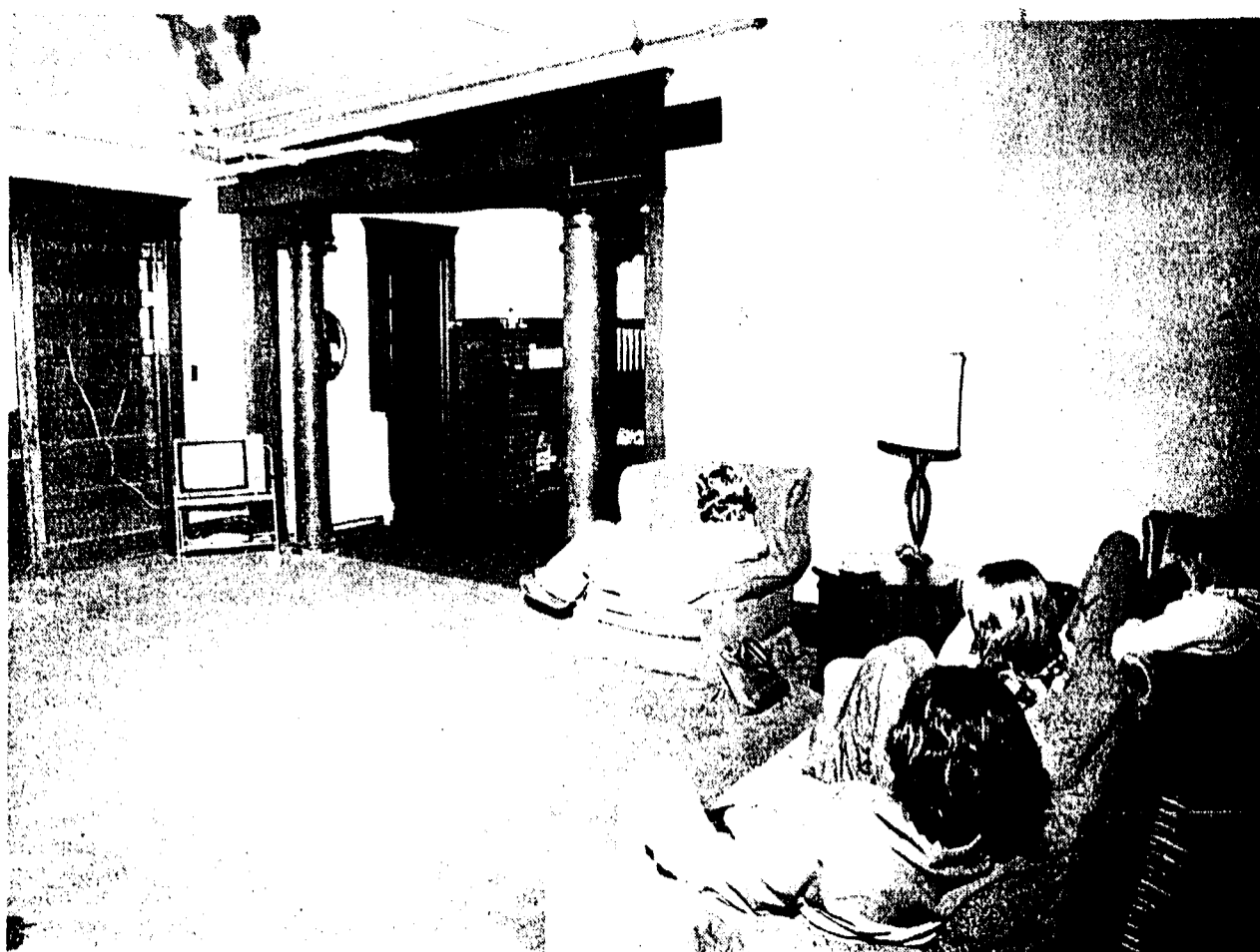




Posters and craft projects personalize the bedroom of teen-age residents at New Dimensions' coed facility. The boys' facility at 1228 Third Ave. SE, lacks the decorating influence of females.



New Dimensions' residents lounge before the facility's television after school. Originally for girls only, the facility on B Avenue NE, was converted to coed last month.

## Homes for society's 'orphans'

# New Dimensions puts youth in community

By Mary Burke  
Gazette staff writer

Community involvement is the key being used by New Dimensions' treatment facilities to turn around the inappropriate behavior of its teenage residents.

The organization operates a coed house at 1818 B Ave. NE and a boys' facility at 1228 Third Ave. SE. Each is licensed by the Department of Social Services to serve 12 youths.

"Our facilities are in neighborhoods; we have to deal with neighbors," explained executive director Bob Buntz.

But, according to their treatment philosophy, that's what New Dimensions is all about — getting youths involved in the community.

All residents are involved with community-based jobs, education or vocational programs; all activities are dependent on community resources for recreation — those requiring residents to develop social skills and behaviors acceptable to the community.

Youth accepted at New Dimensions usually have records of drinking beer as a minor, shoplifting, maybe breaking or entering or auto theft, Buntz said.

"Most are no longer attending regular school programs . . . most either rejected parental authority or have been rejected by their family," Buntz said. "Most reject the tradi-

tional family so they won't tolerate foster homes. Many are disrespectful to adults because they've experienced disrespect from adults. Most are in need of a support system their family cannot supply."

Buntz was the primary organizer of New Dimensions, which was formed in April 1976, assuming the facilities and services previously supplied by FAMCO, a Dubuque-based organization which lost its license from the Department of Social Services. Licensed to serve youths ages 13-17, Buntz said the facilities tend to get those between 15 and 17.

After being accepted by New Dimensions, each resident is assigned to one of the two staff case workers, with whom he or she meets at least once a week or as many as three or four times a week. Each youth is involved in establishing a treatment plan and objectives which relate to his or her individual needs.

"They're expected to be involved in housekeeping duties," Buntz said. "We're not running a motel. They participate in meal preparation and clean up, do yard work."

During the summer, he said, those not working or in school are required to attend several hours a day of structured time where they learn about renting, credit, banking, food preparation.

These activities are led by the seven full-time and two part-time

youth service workers who serve each house. All 18 youth workers are supervised by a program director. The two case workers are supervised by Buntz. The program also has available the services of a medical doctor and psychiatrist.

Buntz worked three years as a child care worker in a Dubuque treatment facility while attending undergraduate school at Loras College and two years as a case worker in the same facility during graduate school at the University of Iowa. Since graduation he has worked in foster care and adoption studies for two years with Catholic Charities, four years as a branch director for Hillcrest Family Services, and two years as branch director of FAMCO.

He said the residents at New Dimensions may stay as long as four years, but two years is the longest term residency so far.

"Most end up in an independent living situation. It could be in conjunction with their family. Some have a parent to give support, financial or moral," Buntz said. He said that one-fourth of the youth return to their own home. Those that aren't successful may wind up at state institutions in Toledo or Mitchellville.

Girls in the New Dimensions' facility had mixed reactions to their living situation. One complained that some girls get more privileges than others.

"They don't try to pick your friends," another girl noted happily. One pointed out that the weekly house meetings gave the girls an op-

portunity to air complaints. Another teen mentioned that new curtains and a new rug had been purchased for the girls' house at their request.

One girl said that there was a lack of privacy, with unannounced inspections of rooms, but grudgingly admitted that there usually was a reason — such as previous possession of marijuana.

Most male residents, whose facility looked like sub-standard housing to my middle-class eye, didn't seem to be affected by the atmosphere created by the damaged furniture, walls and window shades. One boy, however, called the place a "dump" and said it did influence him.

Buntz said that because the residents placed at New Dimensions are used to taking out anger and frustration on walls or furniture, it is difficult and expensive to repair damage every time it occurs.

However, painting and refurbishing of the boys' facility is currently underway, Buntz said.

Wednesday, in the fourth of five articles on youth homes, The Gazette looks at New Dimensions, one of four youth homes in the Cedar Rapids area.

In Monday's story on the Children's Home of Cedar Rapids, Joan Doyle was incorrectly identified as executive director of the organization. Gary Williams is the executive director overseeing buildings and business operations. Doyle is director of professional services, supervising the staff and programs of the organizations.



Sandy Barfels, a cook for the New Dimensions' coed facility, slices beef for an evening meal. The facility at 1818 B Ave. NE, is licensed by the Department of Social Services to house 12 teen-agers.

# Hypertension: Silent killer

By D'Anne Hoover  
U of I Journalism student

IOWA CITY — While high blood pressure can be treated effectively, University of Iowa research confirms that many patients will discontinue treatment.

In a group of patients being treated at the Muscatine Community Health Center, about one-third discontinued treatment during a three-year period and half of those did so during the first six months.

Hypertension is often called "the silent killer" because it may not cause any symptoms or illness in the

patient. Many patients believe that if they "feel okay," why take a medication?

The sobering answer is that some 60,000 Americans die annually from hypertension and related heart disease, stroke, and kidney disease.

The Muscatine study was done by Dr. Jacqueline Dunbar, assistant professor of family practice at the U of I, and Drs. John Ellis and Forrest Dean, both physicians at the Muscatine Community Health Center. Dr. Ellis is an associate in internal medicine at the U of I and Dr. Dean is an associate in family practice.

Dr. Dunbar noted, "Women were twice as likely as men to drop out of the treatment program. Men who dropped out were ordinarily those who were older than the average age for the whole group."

Of those who continued in the program, only 12.5 percent reached a diastolic blood pressure of 90 or below. This is a low percentage, ac-

ording to Dr. Dunbar, who is a psychologist.

Blood pressure is expressed by two numbers, such as 128/72. The second number is the diastolic pressure and is the most significant. Normal blood pressure is typically less than 140/90. Consistent diastolic pressure in the 90s or higher may signal many physicians to begin treatment.

In an effort to increase the percentage of patients achieving an acceptable diastolic blood pressure, Dr. Dunbar says they hope to study the effects of getting the patients more involved in the treatment program by having them take and record their own blood pressures daily and note the taking of medication.

Cardiovascular researchers at the University of Iowa and the Veterans Administration Hospital in Iowa City participated in a national study in the late 1960s which demonstrated

that anti-hypertensive drug treatment is beneficial.

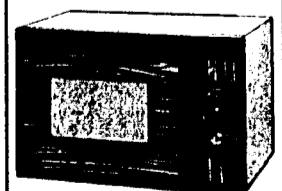
Certain complications, such as congestive heart failure and strokes, were reduced or essentially eliminated in the treated patients. Treatment prevented elevation of diastolic pressure to levels that bring about a greatly increased risk of developing complications.

The studies also clearly indicated that the higher the level of blood pressure, the greater the degree of benefit from anti-hypertensive therapy.

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